

**Wyoming Association of Fairs**  
**SCHOLARSHIP GUIDELINES & APPLICATION**

**ELIGIBILITY:**

- Current or Alumni Wyoming 4-H or FFA member.
- Must be a Sophomore, Jr. or Senior enrolled at any Wyoming accredited institute of higher learning.

**NUMBER AND AMOUNT OF SCHOLARSHIP**

*(You may only apply for **either** the 4-H or FFA Scholarship)*

- One (1) Five Hundred Dollar (\$500.00) scholarship will be given to 4-H
- One (1) Five Hundred Dollar (\$500.00) scholarship will be given to FFA

**SELECTION:**

- 40% on scholastic standing
- 30% on overall 4-H/FFA work
- 30% on character and leadership in their clubs, and participation in their County Fair and Wyoming State Fair.
- Members from the Rocky Mt. Association of Fairs will select the individuals to receive these scholarships.

**ADDITIONAL INFORMATION:**

- Proof of registration and acceptance at an accredited institute of higher learning must be submitted with application.
- Copy of College transcript.
- Letter of recognition from your 4-H Leader or FFA Advisor
- Letter of recognition from your County Fair Manager.

***APPLICATIONS ARE DUE – MAY 1, OF CURRENT YEAR***  
**Scholarship will be announced at Wyoming State Fair**

How many years have you attended your county fair? \_\_\_\_\_

How many years have you attended Wyoming State Fair? \_\_\_\_\_

How many years have you been involved in 4-H and/or FFA?  
And what club or chapters are you/were a member in?

---

---

---

---

List volunteer jobs that you have done during your county or state fair?

---

---

---

---

What have you done to encourage younger members of your club or chapter to attend your local fair and state fair?

---

---

---

---

What do you think is the best part of your fair?

---

---

---

---

PERSONAL DATA

Full Name: \_\_\_\_\_  
                    First                    Middle                    Last

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Social Security: \_\_\_\_\_

Mailing  
Address: \_\_\_\_\_  
                    Street, Rt or Box                    Town                    State                    Zip

Father: \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing  
Address: \_\_\_\_\_

Mother: \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing  
Address: \_\_\_\_\_

Name of Parent or Guardian if other than above: \_\_\_\_\_

High School Attended: \_\_\_\_\_

College or Institution you will be attending next fall? \_\_\_\_\_

Field you are Majoring in: \_\_\_\_\_

PLEASE SEND COMPLETED APPLICATION TO:

Wyoming Association of Fairs

Criss Crozier

Box 473

Sundance, WY 82729

Or - Email: [crookcofair@rtconnect.net](mailto:crookcofair@rtconnect.net)

Fax – 307-283-2655

All applications must be received by May 1<sup>st</sup>.